



STATE OF IOWA

CHESTER J. CULVER, GOVERNOR
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
CHARLES J. KROGMEIER, DIRECTOR

INFORMATIONAL LETTER NO. 817

July 2, 2009

TO: Iowa Medicaid Hospice and Nursing Facility Providers
FROM: Iowa Department of Human Services, Iowa Medicaid Enterprise
RE: Hospice And Nursing Facility Reserve Bed Days
EFFECTIVE: August 1, 2009

Effective August 1, 2009, Iowa Medicaid will reimburse up to 10 reserve nursing facility (NF) bed days per calendar month for hospice recipients who live in a nursing facility **and** for whom acute medical condition require hospitalization. Please note the following:

- This change will not be applied retroactively prior to August 1, 2009.
- Per month, the total of reserve bed days that are available is ten (10). Any balance remaining at the end of the month will not be carried over to the following month.
- An NF reserve bed day will be reimbursed at 42% of the 95% NF room and board reimbursement.
- The revenue code that will designate reserve bed day(s) is Revenue Code 185.
- The hospice will identify the total number of NF reserve bed days within any one calendar month and enter that total on the UB-04 claim form designated by Revenue Code 185. The hospice will reimburse the NF for the reserve bed day amount.
- The total number of days during a calendar month that a hospice recipient receives the benefit of **both** Revenue Code 658 (NF room and board) and Revenue Code 185 (NF reserve bed days) **must be included on the same claim form** on separate lines.
- The revenue code that will designate the total number of days during the calendar month that hospice services were provided during hospitalization is Revenue Code 656 (General Inpatient Care).

Please review Informational Letter 806 (May 19, 2009) announcing the hospice billing limitation to calendar months and the importance of close and careful communication with the local DHS income maintenance worker.

The hospice must complete a Case Activity Report (CAR) (Form 470-0042) for each of the status changes bulleted below for a NF hospice recipient who requires hospitalization. The hospice must submit each status change CAR **within 5 working days** to the DHS income maintenance worker:

- A CAR with the date of discharge from the NF
- A CAR with the date of re-entry into the NF

Following is a link to the local DHS income maintenance offices:
www.dhs.state.ia.us/Consumers/Find_Help/MapLocations.html.

If you have any questions regarding the completion of the UB-04 claim form, please contact IME Provider Services at 1-800-338-7909, locally at 515-725-1004 or by e-mail at imeproviderservices@dhs.state.ia.us.